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PTO/SB/01A (08-03)

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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.78)

Title of Invention	SLOW-RELEASE CHECK VALVE
As the below named inventor(s), I/we declare that:	
This declaration is directed to:	
<input checked="" type="checkbox"/> The attached application, or <input type="checkbox"/> Application No. _____, filed on _____ <input type="checkbox"/> as amended on _____ (if applicable);	
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;	
I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;	
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.	
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.	

FULL NAME OF INVENTOR(S)	
Inventor one: <u>Edward I. Clare, Jr.</u>	
Signature: <u>Edward I. Clare, Jr.</u>	Citizen of: <u>U.S.A.</u>
Inventor two: _____	
Signature: _____	Citizen of: _____
Inventor three: _____	
Signature: _____	Citizen of: _____
Inventor four: _____	
Signature: _____	Citizen of: _____
<input type="checkbox"/> Additional inventors or a legal representative are being named on _____ additional form(s) attached hereto.	

This collection of information is required by 35 U.S.C. 116 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form, and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

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PTO/SB/81 (rev-08)

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and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Edward I. Chase, Jr.
Title	SLOW-RELEASE CHECK VALVE
Art Unit	
Examiner Name	
Attorney Docket Number	3393

I hereby appoint:

☒ Practitioners associated with the Customer Number:

23816

OR

☐ Practitioner(s) named below:

Name	Registration Number
D.A.N. Chase	20,682
Ginsio C. Derueuseau	35,855
Mark E. Brown	30,361

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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OR

☐ Firm or Individual Name: Mark E. Brown/Chase Law Firm, L.C.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71, Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Edward I. Chase, Jr.
Signature	<i>Edward I. Chase Jr.</i>
Date	7-10-04
Telephone	785-484-3021

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representatives(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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